

REPORT OF THE WASC PATHWAY B VISIT TEAM

In Partial Fulfillment of the Requirements for
INITIAL ACCREDITATION

To University of St. Augustine for Health Sciences

February 10-12, 2014

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The team evaluated the institution under the 2008 WASC Senior College and University Commission Standards of Accreditation and prepared this report containing its collective evaluation for consideration and action by the institution and by the Senior College and University Commission.

The formal action concerning the institution's status is taken by the Commission and is described in a letter from the Commission to the institution. This report and the commission letter are made available to the public by publication on the WASC website.

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SECTION I – OVERVIEW AND CONTEXT

Description of Institution and Visit

University of St. Augustine for Health Sciences (USAHS) is comprised of three campuses with locations in San Marcos, CA, St. Augustine, FL and Austin, TX. The majority of educational programs are in the health sciences. Entry-level degree offerings include: Doctor of Physical Therapy (DPT), Master of Occupational Therapy (MOT), Dual Degree Option (MOT/DPT), Part-time Flexible Doctor of Physical Therapy (DPT), Part-time Flexible Master of Occupational Therapy (MOT) and Master of Orthopaedic Assistant (MOA). The University also offers the post professional Transitional Doctor of Physical Therapy Degree (tDPT), post professional Transitional Doctor of Occupational Therapy Degree (OTD), Doctor of Education (EdD), Doctor of Health Science (DHSc), Orthopaedic Clinical Residency, Manual Physical Therapy Fellowship Program and Continuing Education Seminars and Certifications for currently licensed therapists. All entry-level health profession programs are accredited by their respective specialized accrediting organizations.

The University originated as a distance education institution, and since 1993 has maintained accreditation by the Distance Education and Training Council (DETC). USAHS is seeking initial accreditation from WASC via Pathway B which allows for the possibility for institutions already holding national accreditation to achieve WASC Initial Accreditation in one visit.

The purpose of the site visit was to evaluate the USAHS's self-study for initial WASC accreditation using Pathway B criteria. The site visit team requested meetings with groups composed of appropriate representatives from USAHS and Laureate Education, Inc (Laureate). The visit occurred on the San Marcos, CA campus between February 10 and February 12, 2014. During the first two days, meetings were scheduled between 8:00 a.m. and 5:30 p.m. and ranged 30-60 minutes in duration. Meetings were kept on schedule and guided by a list of questions determined in advance that reflected areas of interest.

Prior to the visit to the San Marcos campus, an individual team member and the WASC staff liaison visited the two off-campus sites in St. Augustine, FL and Austin, TX, on January 27 and January 31, 2014 respectively. Reports of these off-campus visits are found in Appendices A and B.

The Capacity and Preparatory Review Self-Study: Quality of the Report and Evidence

The Team found that the Self Study completed by USAHS represented the quality and rigor expected for institutions pursuing Pathway B for initial WASC accreditation. USAHS demonstrated integrity and candor in their responses to each of the Standards and Criteria for Review (CFR). USAHS's Self Study was well written, informative, content rich, and navigable as needed to answer their questions.

The Team appreciated how forthcoming USAHS was in addressing both strengths and weaknesses. The Self Study document served to educate the Team during its preparation for the visit, and also served as a resource and guide to the Team during the visit. The Team applauds USAHS for its commitment to continuous quality improvement, a commitment with deep roots in health professions specialty accreditation that provided a solid foundation to pursue Pathway B WASC accreditation. (CFR 1.9)

Response to Previous Commission Issues

In August 2012, the panel of the WASC Eligibility Review Committee conducted its evaluation of the application of the Eligibility of USAHS. With regard to the 23 criteria, Eligibility Criterion 4 (Governing Board), the recommendation that should Laureate negotiations conclude, USAHS will adapt governance structures to ensure WASC compliance. The team found that the institution had adapted a new governing board structure that has a majority of public members and appears now to be in compliance with CFRs 3.8 and 3.9.

Eligibility Criterion 14 addressed the continuance of plans to hire faculty with terminal degrees from regionally accredited institutions and other than from USAHS. The team was assured by President Nitsch that the University intended to continue the practice of hiring a balanced faculty pool (CFR 3.11), something that is already present on the San Marcos campus and at the Austin Campus.

Eligibility Criterion 17 focused on integration of Laureate learning resources. It was reported to the Team that USAHS expects that, where appropriate (such as expanded library resources), there will be integration, or available shared services, with Laureate's learning resources.

Lastly, Eligibility Criterion 21 stated the need to continue to build the institution's assessment infrastructure, including deployment of Instructional Learning Outcomes (ILOs) in the clinical curriculum.

The team saw evidence that USAHA has already taken steps to build the assessment infrastructure, particularly in the areas of co-curricular, student services assessment and a new Institutional Effectiveness Plan, and that ILOs have been integrated into the clinical curriculum. (CFR 4.4, 4.5 & 4.7)

SECTION II – EVALUATION OF INSTITUTIONAL CAPACITY UNDER THE STANDARDS

Standard 1: Defining Institutional Purpose and Ensuring Educational Objectives

USAHS exhibits integrity in its operations and is transparent and truthful in its presentation of goals and achievements. Board approval of the current mission statement is evident and mission documents are available in multiple locations including the staff, faculty, adjunct faculty, and student handbooks, the university catalog, and the website. (CFR 1.1) Core values further define the character of the USAHS learning process and the overarching meaning of the USAHS degree. In all discussion groups (i.e., faculty, staff, students, and administration,) the “professionalism” of graduates was identified as a valued and significant outcome of the USAHS learning process. That the mission governs the instructional and support processes which develop the USAHS graduate is made clear through the linkage between the University's core values, institutional learning outcomes, program outcomes, and course learning outcomes across all modalities. The newly- developed Institutional Effectiveness Plan is meant to guide data gathering, provide feedback, and to ensure alignment of all resources with the mission and core values. Specific outcomes for administration, educational support, and co-curricular units are developed and extensive implementation plans are in place to collect and report data. (CFR 1.2)

USAHS's three-campus system operates separate from Laureate with its own Board of Directors, a governing body recently modified by a change in majority ownership (80% by Laureate). The institutional leadership includes a President/Chief Academic Officer who reports to a Board of Directors. The newly populated USAHS Board of Directors has representative

membership from USAHS, the Paris family, and Laureate. Seven of the members are independent, four represent Laureate, and two represent Patris, Inc. (CFRs 1.3, 1.6) The Team found that new USAHS Board of Directors has open lines of communication and functional quality assurance mechanisms.

The institution currently uses a two-tier structure for decision-making and developing appropriate recommendations to the Board; the Executive Committee of senior leaders which reports to the President and the Management Committee which reports to the Executive Committee. Evaluation of performance at all levels, including the Board members, staff, and faculty is regularly assessed and planned. (CFR 1.3)

Appropriately approved policies regarding academic freedom, performance evaluations, student admissions and graduation requirements, grievances, and the ethical treatment of human subjects, are readily available in handbooks and on the campus website. Grievances are responded to at the campus level, and information regarding grievances is maintained centrally. (CFRs 1.4, 1.7, 1.8)

The University's Diversity Policy defines diversity through representation, thought and style, and ways of teaching and learning. It is included in the Catalog, Student Handbook, Faculty Handbook, and Staff Handbook and in the University's recruitment ads. USAHS is an equal opportunity employer with defined processes to respond to perceived discrimination. The ILOs reinforce respect for the values and beliefs of people from a variety of backgrounds. Results from a faculty survey designed to assess the inclusion of topics of diversity within the first professional occupational and physical therapy curriculum indicated that of forty courses responding, 36 reported the inclusion of either a course learning outcome, lecture material, an assignment, or a class activity that involved topics or concepts of diversity as defined by the University of St. Augustine for Health Sciences. Nevertheless, with only 15% of its employees and 29% of its students identifying as non-white, USAHS seeks additional progress in promoting "an organizational culture that values diversity in all its forms through inclusive dialogues, experiences, and appreciation and value of others to leverage people as a source of collective learning, campus unity, and institutional strength" through its newly-formed Diversity Committee. (CFR 1.5)

Standard 2: Achieving Educational Objectives through Core Functions

Teaching and Learning

The team found that the programs offered by USAHS are appropriate in content, standards and level. Faculty is sufficient in number to deliver the curriculum and all are qualified by degree and experience to teach assigned courses. (CFR 2.1) The use of course coordinators in each program ensures the consistency across the three campuses and online/onsite teaching modalities.

The entry requirements for the degrees offered by USAHS are clearly defined in the school's website and publications, as well as the level of student achievement necessary for graduation. The entry-level or first-professional programs have been granted professional accreditation from their respective accreditation agencies. (CFR 2.2)

A review of all course syllabi (both online and onsite) revealed that student learning outcomes are well defined and aligned with the institutional learning outcomes. The expectations for student learning are evident, faculty are responsible for the attainment of expectations for student learning and feedback is provided to the students in a timely manner. It was apparent to the team that a sense of shared mission was palpable, with faculty and students seeing professionalism, collegiality, and student-centeredness as core to the learning process and campus culture. Further, the team commends the students at USAHS for demonstrating to the team their passion for learning, motivation, professionalism, and commitment to their chosen profession. It is the team's recommendation that with the anticipated increase in students, programs, and organizational complexity, USAHS ensures that structures are in place to preserve institutional mission and values. (CFR2.3, 2.4, & 2.5)

In 2012, USAHS established an Office of Assessment, which has coordinated the development of institutional and program outcomes that document student achievement. Collection of appropriate indicators to measure these outcomes is underway, and faculty and administrative committees are reviewing these results. Where appropriate, disaggregation of these indicators includes comparison of onsite and online indicators. (CFR 2.6) At the same time, the directors of the university's co-curricular programs established assessment plans and have begun the process of gathering and analyzing evaluative data for these programs. (CFR 2.11) While the gathering and analysis of these data are still in the nascent stage, the university is to be commended for its efforts to develop this process in response to WASC criteria. All programs, both first-professional and post-professional are reviewed on a five-year schedule determined by the Program Review Committee. This program review is used as a cyclical process for evaluating and continuously enhancing the quality and relevancy of programs. The process consists of a four-stage process, 1) planning, 2) department self-study, 3) external program review and report, and 4) development of a multi-year quality improvement plan. Included in the materials reviewed by the program review committee are analyses of student performance indicators (which are linked to program SLOs), retention/graduation rates, results of professional licensing examinations, job placement, and the results of student, alumni, and employer surveys. (CFR 2.7)

At the time of the site visit, two program reviews had been undertaken using this process: tDPT and MOT. While the tDPT review had completed the entire process, the MOT self-study had been completed but the rest of the review cycle was still in process. Interviews with those involved in the tDPT program review provided evidence that USAHS had not only obtained evidence to strengthen the program, but also found ways to tweak the program review process to be even more effective in future reviews. An assessment of the program review process, using the tDPT program review, was undertaken using the WASC rubric for assessing the integration of student learning assessment into program reviews. The team felt that the process reached the "Developed" classification, and commends the University for having this fully-developed process. At the same time, the team recommends that USAHS continue to demonstrate progress through all stages of the assessment cycle, and consider expanding the program self-study teams to include additional faculty and student members.

Scholarship and Creative Activity

During interviews with USAHS faculty (both core and adjunct), numerous examples were given of how creative and innovative suggestions to improve or enhance the teaching/learning process had been shared with colleagues and incorporated in subsequent syllabi and curriculum revisions. And while USAHS is primarily a teaching/professional institution focused on the didactic and clinical preparation of health care professionals, the team was pleased to see institutional support for faculty and student research and involvement in professional associations. Posters illustrating some of the more recent professional presentations of USAHS faculty and students were displayed prominently in the classroom area, and faculty publications were displayed during an informal reception hosted for the team. (CFR 2.8)

This reception also highlighted the involvement of students, through their respective student organizations (SPTA and SOTA), in community outreach and *pro bono* service activities, such as volunteering at REINS Therapeutic Riding Center, and conducting fitness screenings at local skilled nursing facilities. (CFR 2.9)

Support for Student Learning and Success

USAHS gathers student data from the pre-admission phase through graduation and beyond, tracking achievement, student satisfaction, and campus climate to support its assessment of student success. Where appropriate, these data are disaggregated by gender, race/ethnicity, program, and instructional modality in the assessment of student preparation, needs, and experiences in class, clinical rotations, and co-curricular activities. Except for the EdD and DHSc programs which are offered online only, all students in USAHS's other programs have significant onsite learning experiences, and are fully integrated into the life and culture of the institution. Campus resources, including student and library services, adequately support students in the online doctoral programs. (CFR 2.10)

The teams verified that USAHS's publications, both hardcopy and online, clearly describe the requirements of the university's programs. Students indicated, both through student satisfaction surveys and in their conversations with team members, their satisfaction with the institution's communication and advising processes. (CFR 2.12)

Student services at USAHS are administered by diverse individual functions (Registrar, Office of Financial Aid, etc.), but are adequately staffed for student needs across the three campuses. Where appropriate, staff in these functions are situated on each campus; in other cases, the function is centralized on the St. Augustine campus, but available by phone or email to students on the other campuses and online. The university is attentive to student feedback regarding these services via satisfaction surveys, and provided several examples of recent changes that addressed student concerns. (CFR 2.13)

USAHS's transfer policy is clearly outlined in their catalog (p. 40, *2013-14 Catalog*), with the university accepting up to 15% of the total number of academic credits for the degree. These credits are determined on a case-by-case basis from graduate coursework awarded by appropriately-accredited institutions. Further, policies are in place allowing students to transfer from program to program within USAHS, or to withdraw from the DPT portion of the dual MOT/DPT degree program. A table in the USAHS Catalog (p. 42) clearly defines the transfer curricular pathways available to students.

Standard 3: Developing and Applying Resources and Organizational Structures to Ensure Sustainability

Faculty and Staff

USAHS employs experienced and seasoned personnel, sufficient in number, to carry out the functions consistent with the program it offers. All key positions are (or are anticipated to be) filled with individuals with suitable professional qualifications, and sufficient experience to fulfill the functions of the position. However, many key positions have recently turned over, i.e., the CFO, the Vice President for Development (commonly called VP of Administration or Operations), and the DPT Program Director in Austin. (CFR 3.1) In addition, at the time of the Visit, the President served as both the CEO and the Chief Academic Officer of the institution, a dual role that may place undue stress on the individual, and is not in compliance with CFR 3.10. The Board Chair did explain that a new CEO has now been identified and will begin full time service in the near future.

At the time of the Visit, the institution employed 61 core faculty and 176 adjunct faculty to deliver its educational services. The first professional programs, e.g., DPT, MOT, rely primarily upon core faculty to deliver these programs, while the post professional programs, e.g., the Transitional DPT program, primarily rely upon adjunct faculty. The Site Visit Team noted that approximately 86% of the first professional programs and 34% of the post professional programs are taught by core faculty. The institution should continue monitoring these percentages in order to maintain and promote a culture of scholarship within the institution. (CFR 2.8, 2.9) The Team also noted that all programs have at least one full-time “core” faculty teaching/directing in each program. (CFR 3.2) The institution had identified, in its institutional report, that it was concerned about the number of “home grown” faculty employed by the organization. As the team examined this issue, it discovered that this issue is primarily evident on the original Florida campus, 46% home grown, as the percent of homegrown faculty in California and Texas are much lower, approximately 5% and 0%, respectively. The institution responded to this issue in a number of ways, e.g., it created a tuition assistance program for faculty who aspire for another or terminal degree from a different institution. (CFR 3.4) The Visiting Team commends the institution on creating improvements to resolve the situation.

Core faculty, adjunct faculty and staff recruitment, orientation, workload, incentive, and evaluation practices are outlined in the employment handbooks of the institution and in a series of policy statements developed prior to the Team Visit and approved by the Management and Executive Committees of the institution. These policies are aligned with USAHS’s institutional purposes and educational objectives. (CFR 3.3) For faculty and staff, positions are advertised widely in publications suitable for the area of need. These include, but are not limited to: various physical and occupational therapy association publications: Inside Higher Ed, the Chronicle, and Linked-In.

The employee handbooks state there is an annual review of all employees. Reviews for staff are conducted by supervisors, and reviews for core and adjunct faculty are conducted primarily by the Program Directors or Deans, with input from the person being evaluated. The review may include peer component, if requested by the supervising official. (CFR 3.3) The core faculty handbook describes the seven areas to be evaluated: teaching performance, scholarly pursuits, service, administration, professional behaviors, use of release time, and annual goals. The companion document provided to the Team provided greater detail on these areas, and how they are measured. Promotion guidelines are also included in the core faculty handbook; more detail is provided in the companion document. The adjunct family handbook describes the method of adjunct faculty evaluations, who conducts, and how often they are conducted. Peer evaluations are infrequently conducted and the institution should consider how to increase peer evaluations, especially in light of CFR 3.3 which requires “appropriate” peer review of core faculty. (CFR 3.3) Core faculty orientation is required by the Core Faculty Handbook, and detailed in the companion document provided to the Visiting Team. Adjunct faculty orientation is also a multi-step process, involving the IT and HR departments, but is customized by the hiring academic administrator to accommodate departmental requirements. The staff handbook also requires an orientation, but is not described in any level of detail within the document. The institution has established a grievance policy for staff, core faculty, and adjunct faculty and these are contained in the three separate handbooks. The institution should consider expanding the policy statements to include more clarity about the actual procedures, so that the procedures do not become an issue once a grievance is received. (CFR 3.3)

Fiscal, Physical, and Information Resources

USAHS provides professional development opportunities for its core faculty, adjunct faculty, and staff. During the visit faculty shared that professional opportunities are provided for mid-level and senior staff, and core faculty. Staff members are provided opportunities in their respective areas, including attendance at professional association meetings and training, and the institution has recently decided to add an IT trainer to help develop additional skills using software provided by the institution.

Core faculty members are also provided professional development opportunities for their instructional areas. A companion document provided in the evidence folders provides a detailed discussion of purposes, expected outcomes, and an extensive list of opportunities available for the Core faculty. (CFR 3.4)

USAHS has a long history of financial stability. Even though the recently approved budget required an allocation charge from the parent company, Laureate, primarily for additional services, the budget remains balanced, and still includes an acceptable margin.

Budgeting practices are realistic and closely aligned with planning, and alignment with the strategic plan is an expected and prescribed operating policy. The institution has utilized nationally recognized auditors in the past, and with the recent acquisition will use one the nation's largest firms. (CFR 3.5)

The sustainability of the institution was not in question at the time of the visit, as the areas in which they provide instruction are in high demand, and the institution has developed a strong brand, which in the past has required little, if any advertising/marketing to attract students. The Team believes that continued financial health is probable given past and future market demand, judicious financial management, and astute institutional leadership.

USAHS provides a robust library system to its students, available on line, and containing over 20,000 journals, on a direct access basis, 24/7 and 365 days per year. In addition, the library has access to numerous other full-text data bases through consortia agreements, which can be accessed in a request mode. Ninety-nine percent of requested library resources, those that are not immediately available on-line, are delivered within 3 days. All of these services are delivered without additional cost to the institution's students.

At the beginning of each term the library staff assists faculty members and students by delivering instruction to new students to help them navigate the on-line and request library system for access to requested library resources. In addition, a chat program, email, phone calls, and an on-line one credit course are available methods for students to request library services, or information from the library staff. The library staff indicated that being a part of the Laureate system will only improve access to library resources.

Annually, the librarians review the usage of their electronic subscriptions and their interlibrary loans to determine if sufficient use warrants continued use, or if resources acquired through library loans warrant addition through additional subscriptions. Each year this assessment has resulted in some changes to library holdings. The Visiting Team noted that subscriptions for the allied health science areas were more robust than those for the EdD program. For example, JSTOR and EBSCO were not available in an on-line modality. The Visiting Team suggests that the institution consider adding more on-line subscriptions specifically for its EdD program. (CFR 3.6)

The institutional Library Committee serves as the decision-making organization for holdings and policies of the Library. This committee has representatives from the faculty, and this ensures a close tie-in with the needs of the academic programs. (CFR 3.6)

USAHS's information technology infrastructure is sufficient, and even robust, in some instances, to provide support for the type and number of academic programs currently being offered. For example, the institution had utilized the full suite of the Jenzabar ERP prior to the sale to Laureate. Upon the sale, the GL, Account Payable, system transitioned to PeopleSoft and the HR/Payroll transitioned to Laureate's HR/Payroll system, UltiPro. At the time of the Visit, the student information system and LMS/E-learning remained on the Jenzabar platform, with nightly uploads to the GL to accomplish the necessary record keeping and financial reporting tasks.

The University is instituting new assessment software, LiveText, that integrates with the current Jenzabar system and will facilitate assessment of student outcomes at the course, programs, and institution learning outcome levels. This project was scheduled to be completed by the end of the April 2014. The Jenzabar LMS/E-learning platform appears to work well, and supports a great number of students that are served in an on-line modality. Interviews with on-line students indicated that they were generally satisfied with the system, and that problems were addressed quickly by USAHS staff.

The LMS/E-learning platform is also used by face-to-face students as well and all classes have at least a shell from which faculty members may use, as the platform is integrated with Jenzabar Student, and are automatically created when classes are created in the registration system. (CFR 3.7)

Student satisfaction assessment instruments had identified bandwidth within the University as a student concern, and at the time of the visit, this too was in the process of being addressed. For example, the bandwidth at the Texas and California are being upgraded by 50%, and since the greater level of bandwidth issues existed at the Florida campus, it was being increased by 150%. These upgrades were scheduled to be completed by March 31, 2014.

System and data security at the institution was addressed using frequent data back-ups that occur nightly, weekly, monthly, and back-up tapes are stored in multiple locations. To increase redundancy, the institution plans on placing identical servers in all three locations, so that both complete backups and system redundancy is available across the three campus locations. Data security is primarily managed by Cisco at the co-location in Jacksonville, Florida. By policy, USAHS requires passwords to contain at least 10 characters, with numerous other requirements, and they are required to be changed every six months. Access to the databases of the institution requires a separate username and password, and access is tightly controlled.

USAHS is primarily, if not exclusively a PC supported institution, and as such, iPads and iPhones have limited accessibility to the large number of stored videos available to assist students in their courses of study. Since this content is stored in Flash, and cannot be accessed by either iPhones or iPads, a number of students are disadvantaged, and the complaints the Team received centered around uniform and consistent access to stored videos. However, given the large number of Apple tablets and smart phones in use by students and faculty, the institution should consider creating a solution to expand the accessibility to these devices. (CFR 3.7)

Organizational Structures and Decision Making

USAHS has a well-defined decision making process, beginning with its Members, currently Laureate (majority owner) and PSA (minority and former owner). These decision-making processes, at the highest level, are covered in the Operating Agreement of the organization. The Operating Agreement defines the responsibilities, duties, and limitations of what the Board of Directors. For example, since ownership is divided between two entities, Laureate and PSA (Patris of St. Augustine) with 80% with Laureate and 20% with PSA, the Operating Agreement limits loans and distributions to the senior member, Laureate, without a compensating distribution to PSA.

The institution's internal decision making processes are clearly defined in organizational charts, committee charters, and job descriptions. At the time of the visit, one individual served as both President and Chief Academic Officer, and her role was clearly described in numerous documents. Since the decision to separate the two positions was announced during the visit, the two roles will need to be clearly described in organizational charts, job descriptions, and the Operating Agreement in order to continue to maintain clarity of decision-making processes. (CFR 3.8)

The Executive Committee comprised of the President and four senior officers of the organization comprise the senior decision making structure below the Board of Directors level. All significant decisions and policy are reviewed and approved by this group or referred to the Board for further approval. The next level in the internal decision making processes is the Management Committee that is populated with the Executive Committee members and approximately 15 members of next level of management. It includes both academic and administrative administrators and is designed to: 1) facilitate communication among the various staff and academic elements, and; 2) to receive assessment data and then discuss ways in solving issues that were identified in the assessment processes. While some decisions can be made at the Management Committee level, solutions requiring decisions are often referred to the Executive Committee for approval.

The committee charter did not specify the types of decisions that can be made by the Committee; however, members of the Executive Committee noted that members of the Executive Committee are always present in the discussions and ensure that appropriate decisions are referred to the Executive Committee for review, discussion, and decision. While this may have worked in the past, as growth and organization complexity increases, the clarity of decision-making processes should be reviewed. Therefore the Team suggests that the organization consider formalizing the decision making authority for the Management Committee. (CFR 3.8)

New program development has a clear, formal description of the approval process and could be used as a model for other types of decision making. During the past year the institution had also required academic and administrative departments to create standard operating procedures that formalize their decision making authority.

USAHS appears to meet the policy for the independent board of directions requirement, as the majority of the thirteen Directors are Public Directors. In addition to these Public Directors four are appointed “Laureate” members and two members are “Paris” directors. The institution’s Operating Agreement adopted by the new LLC was a negotiated document between Laureate and the Paris entities, largely controlled by the members of the Paris family. The Operating Agreement fulfills the usual role of by-laws in a corporation specifying the duties, size, and limitations of the Board of Directors, prohibitions of conflict of interest, methods of meetings, duties of sub-committees, and the specific levels of decisions that require all Laureate Directors’ approval. The Operating Agreement contains nineteen specific types of decisions that require the Laureate Directors’ approval. These include, but are not limited to: 1) distribution of dividend payments; 2) acquisition of assets and debt above \$500,000; 3) the hiring and firing of the CEO; 4) change of external auditors; 5) approval of the annual operating budget. As the relationship with Laureate develops, caution will need to be taken to preserve the responsibilities of an independent board. Further monitoring of this issue in light of the provisions of WASC’s ‘Independent Governing Board Policy’ which grows out of CFR 3.9 may be warranted.

Another issue with the Board is the inclusion of one member of the President's staff on the Board of Directors, as one of the PSA Directors. At the very least this appears to be an awkward situation, especially since this person reports directly to the President, and will continue to do so, even when the new CEO arrives. The institution should consider the implications of the unusual practice and make changes if needed. (CFR 3.9) (Since the minority ownership by PSA will likely continue for only another two years, the problem will likely disappear at that time.)

USAHS has had an experienced education leader serving as CEO; however she also serves as the Chief Academic Officer as well, not fully complying with CFR 3.10, which requires a full-time Chief Executive Officer. At the visit, the Chair of the Board of Directors indicated that at its second meeting, the Board determined to separate the two roles, and hired a new CEO. The current President will continue to serve as the Chief Academic Officer. Also, at the time of the visit, the CFO's position was unfilled, (CFR 3.10) and had been offered to an individual, but yet had not accepted. Faculty members are fully involved in the development and oversight of the curriculum at the institution. This is especially true at the course level. For example, each course has a course coordinator, who is a faculty member, and leads a small team of faculty members who teach the course at the locations, other than the location where the course coordinator is located. Program directors provide the leadership for individual academic program as a whole, but faculty members are very involved in assessing the effectiveness of the programs learning outcomes, and how course learning outcomes contribute to the program learning outcomes. (CFR 3.11) Faculty governance at USAHS is in an emerging state, as no self-elected faculty committees exist. The Chair of the Board indicated her interest in starting a Faculty Council, but at the time of the visit, this had not occurred.

Standard 4: Creating an Organization Committed to Learning and Improvement

The Team found strategic thinking and planning aligned with institutional purposes permeating all levels of the institution from the Board of Directors to Program Directors. The newly formed Board of Directors has recently undertaken strategic planning, and the team was informed by Board members that they use data to inform decision-making. (CFR 4.1) The Board is engaged in a review of strategic priorities following the recent 80% acquisition of USAHS by

Laureate, and is sensitive to developing strategic initiatives for USAHS that preserve the institutional culture and identity (CFR 3.9), and align academic, personnel, physical, technology and fiscal areas. (CFR 4.2)

There exists a well-developed University Quality Improvement and Strategic Plan 2012-2015 complete with objectives and measures of success that include a color-coded evaluation matrix. However, the team recommends diligence on processes by which new University-wide strategic priorities are developed and assessed by the Board, and are supported by the multiple institutional constituencies. In dialog with Board members it was clearly articulated that the Board functions with autonomy for USAHS, however the Board has only met twice and will revisit strategic planning under the new ownership. It remains to be seen how the Board will: 1) relate to the multiple initiatives in the University Quality Improvement and Strategic Plan 2012-2015, and 2) move to develop new strategic initiatives that reflect the broader interests of Laureate *and* those of the Board's primary responsibility, USAHS.

The institution conducts sustained, evidence-based, and participatory discussions about how effectively it is accomplishing its purposes and achieving its educational objectives. These activities inform both institutional planning and systematic evaluations of educational effectiveness. The results of institutional inquiry, research, and data collection are used to establish priorities at different levels of the institution and to revise institutional purposes, structures, and approaches to teaching, learning, and scholarly work. USAHS has benefitted from their history with professional accrediting agencies to develop cycles of assessment that inform curricular activities (CFR 4.4). The team urges USAHS to monitor the percent of adjunct faculty teaching in the professional and post-professional programs to ensure that the culture of scholarship and programmatic integrity are aligned with institutional expectations. (CFR 4.2, 4.3)

The team found that both leadership and faculty are intimately involved in assessing teaching and learning, and that there is a systematic use of data (i.e., PLO's, course and faculty evaluations) driving planning for improvement. (CFR 4.6, 4.7) The team stresses the refinement of strategic planning for programmatic needs or changes, including growth, with particular input from program directors on required equipment, technology, and resources provided by IT. Progress is evident that assessment of ILO's is maturing, as two of the seven ILO's are currently

being assessed; it is expected that the institution will continue with their plan to systematically assess two or more ILO's each year, including in the clinical curriculum. The team noted that the recent addition of a Director of Institutional Research has already produced benefits in assessment activities, particularly in a recognized area of need co-curricular Assessment. (CFR 4.5)

There are robust lines of communication between stakeholders in the collection, analysis, and use of assessment data to achieve educational effectiveness across all delivery modalities, including face-to-face, blended and online courses. (CFR 4.1, 4.4, 4.6, 4.7, 4.8) The Team finds that USAHS has a sustained assessment program, historically driven by the demands of professional accrediting bodies, that monitors progress on defined programmatic strategic objectives. In addition to current approaches to the assessment of effectiveness, Laureate has the resources to make improvements in analytics needed to elevate the USAHS's capacity to enhance learning and programmatic improvement. (CFR4.8)

Addressing Student Success

USAHS hired a consultant to work with the USAHS First Term Retention Task Force to address the area of student success. Three meetings were held and the findings served as the foundation for the implementation of the recommendations. The areas studied included admissions, student resources, curricular matters, student characteristics, and cultural inter-campus communication. Proposed solutions were presented that were administratively focused as well as curricular considerations and modifications in first term courses. The recommendations were meant to facilitate greater retention rates in the area of student success. Administrative interventions to improve student success included increased "pre-matriculation" interventions, identification of students at risk, improved learning management performance/support and increased resources focused on first term students.

Co-curricular considerations were focused on improving student performance. DPT first term credits (17) were considered excessive and related to increased student attrition. The team discussed the advantages and disadvantages of decreasing the academic load in the first semester. With regard to first term course modifications, student and faculty feedback indicated modifications to the resources and instructional delivery specific to first term courses would

assist to improve student performance. Anatomy was a course that was validated by the faculty and students that was identified for needing improvement, specifically the lab. Addressing consistency amongst all anatomy professors at all campuses to discuss course organization and integration and signature assignments would assist with retention. Proposed methods to assess the effect of planned changes are in place to monitor student retention. The self-study states that a task force is currently looking at first term retention rates. (CFR 2.7, 4.4, 4.5, 4.6, 4.7, 4.8) It is recommended that the institution broaden the assessment of retention to include not only first term, but all consultant recommendations as well as graduation rates. (CFR 2.7)

SECTION III – FINDINGS AND RECOMMENDATIONS

Commendations:

1. Well-written, lucid report that was organized and complete with supporting documents that was accessible. You have a President who is well versed in both WASC and professional accreditation, and has moved proactively to achieve regional accreditation. CFR 1.3
2. Institution that made a commitment to increasing diversity, and is taking initial steps to promote organizational diversity in all its forms. CFR 1.5
3. There is sense of shared mission that is palpable. All constituents identified professionalism, faculty collegiality, and student-centeredness as core to the learning process and culture of USAHS. CFR 1.2, 2.3, 2.8
4. There is an excellent process in place to systematically engage in assessment and program review. CFR 2.7
5. History of financial stability that reflects prudent financial management. CFR 3.5
6. Students who are passionate and motivated, and demonstrated professionalism and a commitment to their chosen profession. CFR 2.5
7. Transparent and effective communication regarding Laureate's acquisition of USAHS. CFR 1.7

Recommendations:

1. Further mature the commitment to increasing diversity in all its forms including ethnic diversity. CFR 1.5, 3.1, 3.2
2. Broaden the assessment of retention to include not only first term, but all consultant recommendations as well graduation rates. CFR 2.7
3. Demonstrate continued progress in the systematic assessment of learning and institutional effectiveness through all stages of the assessment cycle. CFR 2.7, 4.4, 4.5, 4.6, 4.7, 4.8
4. With the anticipated increase in students, programs, and organizational complexity, ensure that structures are in place to preserve institutional mission and values (i.e., *secret sauce*). CFR 1.1, 1.3, 2.1, 2.2, 2.8, 3.8, 3.9
5. Develop peer evaluations for faculty that are consistently applied and equitable. CFR 3.3, 4.7
6. Review and refine governance models, both for the Board of Directors and faculty that reflect best practices. CFR 3.9, 3.11

APPENDICES

Off-Campus Site Summary

Team Report Appendix
OFF---CAMPUS SITE

Institution: University of St. Augustine
Kind of Visit: Pathway B
Date: January 27, 2014

A completed copy of this form should be appended to the team report for all visits in which off---campus sites were reviewed¹. One form should be used for each site visited. Teams are not required to include a narrative about this matter in the team report but may include recommendations, as appropriate, in the Findings and Recommendations section of the team report.

1. Site Name and Address

St. Augustine Campus, University of St. Augustine
1 University Blvd.
St. Augustine, FL 32086

2. Background Information (number of programs offered at this site; degree levels; FTE of faculty and enrollment; brief history at this site; designation as a regional center or off-campus site by WASC)

The University of St. Augustine (USA) obviously began in St. Augustine, Florida, but has moved its administrative headquarters to San Marcos, CA in order to receive accreditation from WASC. While the President has moved to California, the Directors over key areas remain in Florida including the registrar, head librarian, IT, financial aid, admissions, marketing, and online education, with staff members also working under the supervision of these Directors at each campus with the exception of online education which is centralized in FL. This original St. Augustine site is located next to a major community hospital and consists of two large buildings on leased land. The administrative complex used to be a psychiatric hospital focused on long term care, a model no longer funded by insurance providers. This has been re-purposed for the University. The second building is what can only be described as a stunning modern three-story high 105,000 square foot building including several very large "smart" classrooms with each including a small camera in the ceiling above a demonstration table and a large screen on the wall so that all students can see the professor, evidence of well-maintained equipment in all classrooms and the library, large student lounge areas, a dry and wet laboratory including provision for eight cadavers received each semester for classes, a large fitness center and swimming pool open to the public, patients, and students, a community clinic, and wireless internet.

At the time of the visit, Laureate had only taken over majority ownership two months before. Each group was probed about how they viewed the transition and most did not notice any major differences in the program but some added requirements for payroll and requisitions. All those interviewed, including students, were enthusiastic about Laureate's ownership and confident they would continue the same curriculum with added resources from being part of a large system. It was obvious that the President had done a great job in preparing faculty, staff, and students for the transition through her transparency. Several times this reviewer heard that Laureate does not want to mess with the "special sauce" that USA already possesses.

¹ See Protocol for Review of Off-Campus Sites to determine whether and how many sites will be visited.

All of the same groups were enthusiastic about WASC accreditation and clearly understood the advantages of regional accreditation.

Based on this reviewer's visit to the FL campus, it is apparent that all three campuses are viewed as co-equal which is the result of constant communication and meetings between them. Through the use of technology and large screens, the following mandatory meetings take place between all three campuses: university wide faculty meeting (monthly), Management Committee consisting of all Program Directors and Student Service Directors (monthly), Program Directors {each program has a Director on each campus} (every two weeks), university-wide programs (every other week), local program faculty by individual program (weekly), and regular meetings of course professors. The President is also highly visible on each campus. This level of engagement has created an unusual sense of collaboration one would not even find on most campuses located in one location but has enabled a cohesiveness of mission, program, learning outcomes, assessment, and program review to mention a few areas. No sense of separateness exists on this site.

3. Nature of the Review (material examined and persons/committees interviewed)

Pathway B. A campus tour was conducted by two students with observation of two classes. Interviews were held with: students with some Ed.D. students calling in from around the United States, Core and Adjunct Faculty, Program Directors, Student Service Directors, and Administration.

Observations and Findings

Lines of Inquiry	Observations and Findings	Follow-up Required (identify the issues)
<p><i>Fit with Mission.</i> How does the institution conceive of this and other off-campus sites relative to its mission, operations, and administrative structure? How is the site planned and operationalized? (CFRs 1.2, 3.1, 3.5, 4.1)</p>	<p>USA has three co-equal campuses with no evident priority being given to any of the three. The mission is shared through constant meetings among the three campuses which is described above. As mentioned earlier, while the President resides in CA, the overall Directors for the three campuses are located in FL. Each campus has its own Program Directors who are in constant communication with their counterparts on the other campuses. The FL site has continued its operations without much change or any feeling that their position has been usurped by CA with the move of the President.</p>	
<p><i>Connection to the Institution.</i> How visible and deep is the presence of the institution at the off-campus site? In what ways does the institution integrate off-campus students into the life and culture of the institution? (CFRs 1.2, 2.10)</p>	<p>These are co-equal campuses so one doesn't have a sense of this location being a branch campus. As the "mother" campus, students have never sensed that they are away from the "main" campus where the President is located. Students on the three campuses meet and room together at national meetings. They share the same clubs, activities, social programs, and fundraising activities.</p>	
<p><i>Quality of the Learning Site.</i> How does the physical environment foster learning and faculty-student contact? What kind of oversight ensures that the off-campus site is well managed? (CFRs 1.8, 2.1, 2.5, 3.1, 3.5)</p>	<p>The buildings are large and well maintained located in an area adjacent to water near historic St. Augustine. Because all of the classrooms are located in one large building, students are together in the same area which encourages student interaction with faculty members. No special oversight is needed of the campus because all campuses are treated equally with one senior administrator who is the founder's son overseeing campus development of the overall University.</p>	

<p><i>Student Support Services. CPR:</i> What is the site's capacity for providing advising, counseling, library, computing services and other appropriate student services? Or how are these otherwise provided? <i>EER:</i> What do data show about the effectiveness of these services? (CFRs 2.11-2.13, 3.6, 3.7)</p>	<p>Because the University serves an older population with the average age being 29 years old and all students required to have a Bachelor's degree before admission, the usual array of student services is not needed. All of the essential services are maintained at this campus. Student satisfaction is strong. Whenever needs are expressed by students, they say that changes are made quickly to meet their concerns.</p>	
<p><i>Faculty.</i> Who teaches the courses, e.g., full-time, part-time, adjunct? In what ways does the institution ensure that off-campus faculty is involved in the academic oversight of the programs at this site? How do these faculty members participate in curriculum development and assessment of student learning? (CFRs 2.4, 3.1-3.4, 4.6)</p>	<p>The University emphasizes a major role for a large group of core faculty who are fulltime bolstered by adjunct professors who primarily teach in the hybrid, flex, or online program while some provide assistance in large classes in helping supervise students as they practice OT and PT techniques demonstrated by the professor. The regular meetings written about earlier provide for active participation in curriculum development and assessment centered around constant communication. Adjunct faculty appear to have effective opportunities to become engaged in the University's culture through participation in retreats and access to online materials.</p>	
<p><i>Curriculum and Delivery.</i> Who designs the programs and courses at this site? How are they approved and evaluated? Are the programs and courses comparable in content, outcomes and quality to those on the main campus? (CFR 2.1-2.3, 4.6) [Also submit credit hour report.]</p>	<p>The curriculum is unified across the University with the same outcomes present in all courses. The individual professor has some freedom to make limited modifications but training in these fields is prescribed by national norms. The founder of USA, Stanley Paris, has been known as one of the most innovative leaders in the field so the University has been at the cutting edge of many areas. USA does not have a "main" campus since all are co-equal. The credit hour policy will be the same for all three campuses so it will be submitted in the team report</p>	

<p><i>Retention and Graduation.</i> What data on retention and graduation are collected on students enrolled at this off-campus site? What do these data show? What disparities are evident? Are rates comparable to programs at the main campus? If any concerns exist, how are these being addressed? (CFRs 2.6, 2.10)</p>	<p>Graduation and retention rates are similar across all three campuses. These rates are above national averages but USA wants to exceed those rates so they have developed plans for improvement.</p>	
<p><i>Student Learning. CPR:</i> How does the institution assess student learning at off-campus sites? Is this process comparable to that used on the main campus? <i>EER:</i> What are the results of student learning assessment? How do these compare with learning results from the main campus? (CFRs 2.6, 4.6, 4.7)</p>	<p>Student learning is assessed the same at all three campuses through regular course assessment, program review which has just begun, and national passage rates which exceed average rates for similar institutions. Program Directors provided examples of changes that have been made as a result of assessment and program review.</p>	
<p><i>Quality Assurance Processes: CPR:</i> How are the institution's quality assurance processes designed or modified to cover off-campus sites? <i>EER:</i> What evidence is provided that off-campus programs and courses are educationally effective? (CFRs 4.4-4.8)</p>	<p>Because there is no differentiation between campuses, no special provisions are made for this site beyond what is done as a system. The processes are shared through regular video conferencing. Two evidences of educational effectiveness are critical for this kind of a university: 1) Are students passing national exams at appropriate rates? The answer is that they exceed national averages. 2) Are graduates getting work? Students who were interviewed indicated no concern about getting jobs asserting that they will be able to choose from several offers given the excellent reputation of USA and its contacts throughout the country.</p>	

Austin Site Visit 1-31-14

Team Report Appendix OFF---CAMPUS SITE

Institution: University of St. Augustine
Kind of Visit: Pathway B
Date: January 28, 2014

A completed copy of this form should be appended to the team report for all visits in which off---campus sites were reviewed². One form should be used for each site visited. Teams are not required to include a narrative about this matter in the team report but may include recommendations, as appropriate, in the Findings and Recommendations section of the team report.

1. Site Name and Address
University of St. Augustine
5401 Lacrosse Ave
Austin, TX 78739
2. Background Information (number of programs offered at this site; degree levels; FTE of faculty and enrollment; brief history at this site; designation as a regional center or off-campus site by WASC)

The University of St. Augustine (USA) obviously began in St. Augustine, Florida, but has moved its administrative headquarters to San Marcos, CA in order to receive accreditation from WASC. While the President has moved to California, the Directors over key areas remain in Florida including the registrar, head librarian, IT, financial aid, admissions, marketing, and online education, with staff members also working under the supervision of these Directors at each campus with the exception of online education which is centralized in FL. The Texas site is very new, with two more buildings planned. The second building, had its footings poured at the time of the visit, and is scheduled to be finished for the fall 14 trimester. The first building is new, attractive, and well appointed. In addition, it includes one large "amphitheater" style classroom, two large lab teaching areas, a library with several study areas, and all teaching areas are "smart" classrooms with each including a small camera in the ceiling above a demonstration table and a large screen on the wall so that all students can see the professor, evidence of well-maintained equipment in all classrooms and the library. The student lounge area is small, but the new building will include a much larger student area. Perhaps most impressively, the building included one dry and one wet laboratory, which included eight cadavers. The professor providing the tour was especially proud of the fact that St. Augustine had such a lab and that it was unusual for a DPT program to have such a lab.

At the time of the visit, Laureate had only taken over majority ownership two months before. Each group was probed about how they viewed the transition and most did not notice any major differences in the program but some added requirements for payroll and requisitions. All those interviewed, including students, were enthusiastic about Laureate's ownership and confident they would continue the same curriculum with added resources from being part of a large system. It was obvious that the President had done a great job in preparing faculty, staff, and students for the transition through her transparency. Several times this reviewer heard that Laureate does not want to mess with the "special sauce" that USA already possesses.

All of the same groups were enthusiastic about WASC accreditation and clearly understood the advantages of regional accreditation.

Based on this reviewer's visit to the TX campus, it is apparent that all three campuses are viewed as an integral part of the University. This view is fostered frequent communication, virtual meetings, and exchange of key faculty. Through the use of technology and large screens, the following mandatory meetings take place between all three campuses: university wide faculty meeting (monthly), Management Committee consisting of all Program Directors and Student Service Directors (monthly), Program Directors {each program has a Director on each campus} (every two weeks), university-wide programs (every other week), local program faculty by individual program (weekly), and regular meetings of course professors. The President is also highly visible on each campus, and she was present for this visitor's review of the Austin campus. This level of engagement has created an unusual sense of collaboration one would not even find on most campuses located in one location but has enabled a cohesiveness of mission, program, learning outcomes, assessment, and program review to mention a few areas.

3. Nature of the Review (material examined and persons/committees interviewed)

Pathway B. A campus tour was conducted by Dr. Robert Rice, the Acting Program director for the DPT program. During the tour, two classes were observed and interviews with students were conducted later in the day. In addition, this visitor met with core faculty, program directors, student service personnel, the President, and other campus leaders (Dr. Robert Rice and Dr. Catherine Pala, by phone.

Observations and Findings

Lines of Inquiry	Observations and Findings	Follow-up Required (identify the issues)
<p><i>Fit with Mission.</i> How does the institution conceive of this and other off-campus sites relative to its mission, operations, and administrative structure? How is the site planned and operationalized? (CFRs 1.2, 3.1, 3.5, 4.1)</p>	<p>The Texas campus does not appear to see itself as any less than the other campuses, although the Florida campus has had the most significant role in curricular development for the DPT program. The mission is shared through frequent meetings among the three campuses, both at the faculty and staff levels. As mentioned earlier, while the President resides in CA, the overall Directors for the three campuses are located in FL. Each campus has its own Program Directors who are in constant communication with their counterparts on the other campuses. The FL site has continued its operations without much change or any feeling that their position has been usurped by CA with the move of the President.</p>	

<p><i>Connection to the Institution.</i> How visible and deep is the presence of the institution at the off-campus site? In what ways does the institution integrate off-campus students into the life and culture of the institution? (CFRs 1.2, 2.10)</p>	<p>These are co-equal campuses so one doesn't have a sense of this location being a branch campus. Students on the three campuses meet and room together at national meetings. They share the same clubs, activities, social programs, and fundraising activities.</p>	
<p><i>Quality of the Learning Site.</i> How does the physical environment foster learning and faculty-student contact? What kind of oversight ensures that the off-campus site is well managed? (CFRs 1.8, 2.1, 2.5, 3.1, 3.5)</p>	<p>The current building is of an adequate size to conduct the current program, and actually could serve maybe up to 50 students more, within the same program. Growth in faculty can be accommodated, as a number of empty faculty offices and support staff office remain. The building is well maintained, and technologically advanced. Because all of the classrooms are located in one large building, students are together in the same area which encourages student interaction with faculty members</p>	
<p><i>Student Support Services. CPR:</i> What is the site's capacity for providing advising, counseling, library, computing services and other appropriate student services? Or how are these otherwise provided? <i>EER:</i> What do data show about the effectiveness of these services? (CFRs 2.11-2.13, 3.6, 3.7)</p>	<p>Each student is assigned a faculty advisor upon matriculation, and this advisor typically stays with them throughout their program. None of the students I met with expressed any concern over student support services. From both personal interviews and the student satisfaction surveys, it appears that student satisfaction is high. Whenever needs are expressed by students, they say that changes are made quickly to meet their concerns.</p>	

<p><i>Faculty.</i> Who teaches the courses, e.g., full-time, part-time, adjunct? In what ways does the institution ensure that off-campus faculty are involved in the academic oversight of the programs at this site? How do these faculty members participate in curriculum development and assessment of student learning? (CFRs 2.4, 3.1-3.4, 4.6)</p>	<p>The University emphasizes a major role for core faculty who are fulltime. In addition, adjunct professors who are primarily practitioners supplement the core faculty. Each class I visited had two faculty members, plus an assistant. A guest lecturer was also on campus providing a lecture that was well-attended, even though voluntary. Faculty members are very invested in course development, through task forces, faculty meetings, and course coordinators meetings. Even though the faculty must obtain final approval from the executive committee for curricular changes, the faculty are involved at each step in the process, until the last step, executive committee approval.</p>	
<p><i>Curriculum and Delivery.</i> Who designs the programs and courses at this site? How are they approved and evaluated? Are the programs and courses comparable in content, outcomes and quality to those on the main campus? (CFR 2.1-2.3, 4.6) [Also submit credit hour report.]</p>	<p>The curriculum is unified across the University with the same outcomes present in all courses. The individual professor has some freedom to make limited modifications but training in these fields is prescribed by national norms. The founder of USA, Stanley Paris, has been known as one of the most innovative leaders in the field so the University has been at the cutting edge of many areas. USA does not have a "main" campus since all are co-equal. The credit hour policy will be the same for all three campuses so it will be submitted in the team report</p>	
<p><i>Retention and Graduation.</i> What data on retention and graduation are collected on students enrolled at this off-campus site? What do these data show? What disparities are evident? Are rates comparable to programs at the main campus? If any concerns exist, how are these being addressed? (CFRs 2.6, 2.10)</p>	<p>Graduation and retention rates are similar across all three campuses. These rates are above national averages but USA wants to exceed those rates so have developed plans for improvement.</p>	

<p><i>Student Learning. CPR:</i> How does the institution assess student learning at off-campus sites? Is this process comparable to that used on the main campus? <i>EER:</i> What are the results of student learning assessment? How do these compare with learning results from the main campus? (CFRs 2.6, 4.6, 4.7)</p>	<p>The student learning outcomes at the Austin Campus are assessed in the same way as at the other two campuses. A course coordinator ensures uniformity in CLOs for all three campuses and works with individual course lead instructors at the local campus to evaluate differences in performance at the individual campuses. Program Directors provided numerous examples of changes that have been made as a result of assessment and program review. Students confirmed that they had observed changes being made to courses from one semester to the next.</p>	
<p><i>Quality Assurance Processes: CPR:</i> How are the institution's quality assurance processes designed or modified to cover off-campus sites? <i>EER:</i> What evidence is provided that off-campus programs and courses are educationally effective? (CFRs 4.4-4.8)</p>	<p>The institution works hard to ensure that no differences exist between locations. The course coordinator is the faculty member responsible to coordinate and ensure CLO are the same between campuses, and if differences in learning is different why, and actions are taken to improve the lagging locations. Improved scores are studied to ensure that best practices are shared with other locations. The processes are shared through regular video conferencing.</p>	

<p><i>Other Observations:</i> <i>CFR 3.10</i></p>	<p>The President serves as both the CEO and the CAO, which appears to be in conflict with the CFR 3.10. The President believes that the current arrangement works well and that her CEO role does not suffer from her CAO role. A new position of ALO has been created and this responsibility will be transferred to the new person.</p>	
<p><i>CFR 3.4</i></p>	<p>Both staff and faculty development are handled well. Each staff member I met with was allowed to attend at least one professional development event each year. Likewise the faculty were also well supported in this area.</p>	
<p><i>CFR 3.7</i></p>	<p>The students at the Austin campus are happy with the level of IT support offered at the location. The President admitted that most of the problems with IT have occurred at the CA campus, and that the CA campus is the last to receive upgrades that other campuses have already received.</p>	
<p><i>CFR 3.2</i></p>	<p>The faculty members at the Austin campus are very engaged and enthusiastic. All have been hired within the last three years, and all have terminal degrees from other institutions.</p>	
<p><i>Standard 1</i></p>	<p>All of the information presented in the self study was supported on the ground by staff and faculty.</p>	

<i>CFR 2.11</i>	The institution believes in co-curricular programs, and has a number of them; however, they have not been evaluated as to their effectiveness.	
<i>CFR 2.13</i>	The local services provided to students appear to be at a healthy level. Students expressed satisfaction with the services they received.	

COMPLIANCE AUDIT CHECKLIST FOR ACCREDITATION

Name of Institution: University of St. Augustine for Health Sciences

Review Date: Initial Accreditation, Feb 2014

Instructions to institution:

Please provide a link to each document designated below, or note where hard copies are filed. Be sure that the reviewer will be able to see where this document is published or located. If the listed document is not available but a comparable document is available, please reference that document. Information or policies published in the institution's Catalog can be referenced as such and not repeated. If a requested document or policy is not applicable to the institution, please mark NA.

The Commission expects institutions to complete the compliance audit once. In subsequent reaffirmation reviews, the institution will update only those documents that have been revised.

Instructions to team:

Please attach this form to the team report. Missing documents should be noted in the recommendations section of the team report as appropriate.

CFR	Documents Required	Link to Website or Document Portfolio	WASC
1.1	Mission statement	Catalog: Page 12 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf Website: Home Page, bottom-left corner https://www.usa.edu/ Staff Employment Handbook: Page 7 Attachment CFR 1.1.01 Staff Employment Handbook Core Faculty Employment Handbook: Page 7 Exhibit 4, Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 7 Exhibit 5, Adjunct Faculty Employment Handbook Student Handbook: Page 5 Exhibit 6, Student handbook http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf	X
1.2.	Public posting of student achievement (retention/graduation, student learning) if not in Catalog	Website: http://www.usa.edu/files/e071f022-0d71-48c4-8b11-5891fc99563e.pdf	X
1.3	Organization chart	University Intranet: I:\Institutional Planning\Org Charts	X

1.4	Academic freedom policy	Catalog: Page 38 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf Staff Employment Handbook: Page 23 Attachment CFR 1.1.01 Staff Employment Handbook Core Faculty Employment Handbook: Page 21 Exhibit 4, Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 21 Exhibit 5, Adjunct Faculty Employment Handbook Student Handbook: Page 19 Exhibit 6, Student handbook http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf	X
1.5	Diversity statements and procedures; also for accommodations of disabilities	Catalog: Page 38 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf Staff Employment Handbook: Page 24 Attachment CFR 1.1.01 Staff Employment Handbook Core Faculty Employment Handbook: Page 22 Exhibit 4, Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 24 Exhibit 5, Adjunct Faculty Employment Handbook Student Handbook: Pages 23 http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf Student ADA Handbook: MyUSA https://my.usa.edu/ICS/icsfs/Student_Handbook_to_Reasonable_Accommodations_rev.pdf?target=1b28dda0-3a09-4867-9099-82135384f1d3	X
1.6	Documents setting forth the authority of a controlling or sponsoring entity that is affiliated with the accredited institution, if any	President's Office	X
1.7.a	Catalog (online, hard copy) with complete program descriptions, graduation requirements, grading policies	Website: http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf	X
1.7.b	Student complaint and grievance policies	Student Handbook: Page 46 http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf Student ADA Handbook: P6 MyUSA https://my.usa.edu/ICS/icsfs/Student_Handbook_to_Reasonable_Accommodations_rev.pdf?target=1b28dda0-3a09-4867-9099-82135384f1d3	X

1.7.c	Grade appeals policies	Student Handbook: Pages 31 & 79 http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf Core Faculty Employment Handbook: Page 105 Exhibit 4, Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 75 Exhibit 5, Adjunct Faculty Employment Handbook	X
1.7.d	Faculty complaint and grievance policies	Core Faculty Employment Handbook: Page 57 Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 35 Exhibit 5. Adjunct Faculty Employment Handbook	X
1.7.e	Staff complaint and grievance policies	Staff Employment Handbooks: Page 44 Attachment CFR 1.1.01 Staff Employment Handbook	X
1.7.f	Employee handbook or equivalent	Core Faculty Employment Handbook: Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Exhibit 5. Adjunct Faculty Employment Handbook Staff Employment Handbooks: Attachment CFR 1.1.01 Staff Employment Handbook	X
1.7.g	Redacted examples of student transcripts with key that explains credit hours, grades, degree levels, and related interpretive information	University's Management Database	X
1.7.h	Policies for changing grades	Core Faculty Employment Handbook: Page 105 Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 75 Exhibit 5. Adjunct Faculty Employment Handbook Student Handbook: Page 31 http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf	X
1.7.i	Tuition and fee schedule	Catalog: Page 32 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf Website: https://www.usa.edu/p7-402-Admissions-Requirements.aspx Student Handbook: Page 11 http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf	X
1.7.j	Tuition refund policy	Catalog: Pages 36 & 55 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf Student Handbook: Page 11 http://www.usa.edu/files/88ae785c-ea1d-4df7-8f7d-4ebdd550457d.pdf Website: http://www.usa.edu/p58-342-Tuition-Refund.aspx	X

1.7.k	Policy on credit hour/award of credit; processes for review of assignment of credit; examples of reviews of syllabi to ensure equivalency among kinds of courses	Catalog: Page 47 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf Core Faculty Employment Handbook: Page 107- 108 Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 77 Exhibit 5. Adjunct Faculty Employment Handbook Course Coordinator Process: Intranet (I:drive\Course Coordinators\Course Coordinator Review Form)	X
1.7.l	Policy on human subjects in research, if applicable	MyUSA Portal: http://usa-document.com/dpt/IRB.doc	X
1.8	Independent annual audits of finances	CFO's office	X
2.1	List of degree programs, showing curriculum and units for each	Catalog: Page 14, 60-96 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf	X
2.2	For associate and bachelor's degrees: General education requirements	Not applicable	N/A
2.6	Placement data, if available	Website: http://www.usa.edu/files/e071f022-0d71-48c4-8b11-5891fc99563e.pdf	X
2.7	Program review process and schedule	Intranet for Guidelines	X
2.8	Policies re faculty scholarship and creative activity	Core Faculty Employment Handbook: Page 22, 26 Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 22, 54 Exhibit 5. Adjunct Faculty Employment Handbook Staff Employment Handbook: Page 23 Attachment CFR 1.1.01	X
2.10	Policy on student evaluation of faculty	Core Faculty Employment Handbook: Page 25 Exhibit 4. Core Faculty Employment Handbook	X
2.12	Academic calendar	Website: https://www.usa.edu/p7-230-Academic-Calendar.aspx Catalog: Page 20-25 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf	X
2.13	Examples of recruitment and advertising materials	Marketing Office	X
2.14	Policy on transfer of credit	Catalog: Page 30 http://www.usa.edu/files/35aa0626-549c-464a-b285-f1d8f0478fd9.pdf	X
3.1	Staff development policies	Current under revision with change of ownership	X
3.2	List of faculty with classifications, e.g., core, full-time, part-time, adjunct, tenure track, by program as relevant	Payroll Department	X
3.3.a	Faculty evaluation policy and procedures	Core Faculty Employment Handbook: Page 25 Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 24 Exhibit 5. Adjunct Faculty Employment Handbook	X

3.3.b	Faculty handbook or equivalent	Core Faculty Employment Handbook: Exhibit 4. Core Faculty Employment Handbook ; Adjunct Faculty Employment Handbook: Exhibit 5. Adjunct Faculty Employment Handbook	X
3.4	Faculty development policies	Core Faculty Employment Handbook: Pages 53 & 55 Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Pages 25 & 64 Exhibit 5. Adjunct Faculty Employment Handbook	X
3.4.a	Faculty orientation policies and procedures	Core Faculty Employment Handbook: Page 51 Exhibit 4. Core Faculty Employment Handbook Adjunct Faculty Employment Handbook: Page 33 Exhibit 5. Adjunct Faculty Employment Handbook	X
3.4.b	Policies on rights and responsibilities of non full-time faculty	Adjunct Faculty Employment Handbook: Pages 18 & 25 Exhibit 5. Adjunct Faculty Employment Handbook	X
3.5.a	Most recent financial aid audits	Financial Aid Office	X
3.5.b	Last federal composite score if applicable	Financial Aid Office	X
3.5.c	Last report of two- and three-year cohort default rates	Financial Aid Office	X
3.9.a	List of governing board members with CVs	President's Office	X
3.9.b	List of governing board committees with members	President's Office	X
3.9.c	Minutes of board meetings for last two years (where located; not the actual minutes)	President's Office	X
3.9.d	Governing board bylaws and operations manual	President's Office	X
3.10.a	CEO biographical information	President's Office	X
3.10.b	Policy and procedure for the evaluation of president/CEO	President's Office	X
3.11.a	Faculty governing body charges, bylaws and authority if applicable	Not applicable	Recommendations being made in team report
3.11.b	Faculty governance organization chart If applicable	Not applicable	Recommendations being made in team report
4.1	Strategic plan and related documents	President's Office	X
4.2	Description of planning process including plan for monitoring of implementation	President's Office	X
4.4	New program approval process	Curriculum Committees	X
4.5	Description of institutional research function and staffing	Vice President's Office	X
4.8	List of major industry or other advisory committees	University Intranet	X

Team Comments: None

Accuracy and Availability of Records: Team Only		
	Policies and procedures for students, faculty and staff are stated consistently in all media	
	Policies, procedures, and information are readily available to relevant constituents	
	Records are accurate and up to date	

Team Comments: None

CREDIT HOUR AND PROGRAM LENGTH REVIEW – TEAM REPORT

Institution: University of St. Augustine for Health Sciences

Date: February 11, 2014

A completed copy of this form should be appended to the team report. Teams are not required to include a narrative about this matter in the team report but may include recommendations, as appropriate, in the Findings and Recommendations section of the team report.

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the comment section of this column as appropriate.)	Verified Yes/No
Policy on credit hour	Is this policy easily accessible? Where? Yes, catalog, syllabi	Yes
	Where is the policy posted? Catalog, some syllabi	Yes
	Comments: Syllabi include policy as well as specific reference to instructional hours as well as learning hours. Did not find in faculty or student handbook.	
Process(es)/ periodic review	Does the institution have a procedure for periodic review of credit hour assignments to ensure that they are accurate and reliable (for example, through program review, new course approval process, periodic audits)?	Yes
	Does the institution adhere to this procedure?	Yes
	Comments: Course coordinator reviews syllabi and course evaluations, makes recommendations. Question: "Did the syllabus chart on credit/contact hours accurately reflect the amount of time spend in the course" or "how many hours other than lab hours, did you spend per week on this course?" are on all course evaluation forms.	
Schedule of on-ground courses showing when they meet	Does this schedule show that on-ground courses meet for the prescribed number of hours? Yes	Yes
	Comments: Consistent across campuses	
Sample syllabi or equivalent for online and hybrid courses	What kind of courses (online or hybrid or both)? Online	
	How many syllabi were reviewed? four	
	What degree level(s)? doctorate and masters	
	What discipline(s)? health sciences and physical therapy	
	Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded? Yes	Yes
	Comments:	
Sample syllabi or equivalent for other kinds of courses that do not meet for the prescribed hours (e.g., internships, labs, clinical, independent study, accelerated)	What kinds of courses? labs	
	How many syllabi were reviewed? four	
	What degree level(s)? doctorate and masters	
	What discipline(s)? occupational therapy and physical therapy	
	Does this material show that students are doing the equivalent amount of work to the prescribed hours to warrant the credit awarded?	Yes
	Comments:	

Sample program information (catalog, website, or other program materials)	What kinds of programs? DPT and MOT	
	How many programs were reviewed? Two	
	What degree level(s)? doctorate and masters	
	What discipline(s)? occupational therapy and physical therapy	
	Does this material show that the programs offered at the institution are of a generally acceptable length?	Yes
	Comments: MOT is 107 and DPT is 126, Length is governed by professional accreditors.	

STUDENT COMPLAINTS REVIEW - TEAM REPORT APPENDIX

Institution: University of St. Augustine for Health Sciences

Date: February 10, 2014

A completed copy of this form should be appended to the team report. Teams are not required to include a narrative about this matter in the team report but may include recommendations, as appropriate, in the Findings and Recommendations section of the team report.

Material Reviewed	Questions/Comments (Please enter findings and recommendations in the comment section of this column as appropriate.)	Verified Yes/No
Policy on student complaints	Does the institution have a policy or formal procedure for student complaints?	Yes
	Is the policy or procedure easily accessible? Where?	Yes
	Comments: The policy regarding student complaints can be found in: <ul style="list-style-type: none"> • USAHS Catalog 2013-14, page 32 • USAHS 2013-14 Student Handbook, page 32 • Online at: http://www.usa.edu/content.aspx?sec=54&id=9442d59a-35f0-4940-b537-86a543cbb670 	
Process(es)/ procedure	Does the institution have a procedure for addressing student complaints? Please describe briefly:	Yes
	Does the institution adhere to this procedure?	Yes
	Comments: The policy regarding student complaints can be found in: <ul style="list-style-type: none"> • USAHS Catalog 2013-14, page 33 • USAHS 2013-14 Student Handbook, page 33 • Online at: http://www.usa.edu/content.aspx?sec=54&id=9442d59a-35f0-4940-b537-86a543cbb670 	
Records	Does the institution maintain records of student complaints? Where? Complaints reside with Program Directors unless they are elevated to the next level.	Yes
	Does the institution have an effective way of tracking and monitoring student complaints over time? Please describe briefly:	Yes
	Comments: Student complaints are first reviewed at the Program Director level, and if unresolved are forwarded as per written procedures to senior USAHS administration. Student complaint files are retained in the President's Office. These files are systematically reviewed and appropriate actions are documented. Additional comments as related to the action are documented as appropriate.	

MARKETING AND RECRUITMENT REVIEW: TEAM REPORT APPENDIX

Institution: University of St. Augustine for Health Sciences

Date: February 10, 2014

A completed copy of this form should be appended to the team report. Teams are not required to include a narrative about this matter in the team report but may include recommendations, as appropriate, in the Findings and Recommendations section of the team report.

Material Reviewed	Questions and Comments: Please enter findings and recommendations in the comment section of this table as appropriate.	Verified Yes/No
*Federal regulations	Does the institution follow federal regulations on recruiting students?	Yes
	Comments: Federal regulations are followed on recruiting students.	
Degree completion and cost	Does the institution provide accurate information about the typical length of time to degree?	Yes
	Does the institution provide accurate information about the overall cost of the degree?	Yes
	Comments: Student Advising Guide for each program gives clear information on tuition and credits required for completion of each professional and post--professional degree. Institution clearly states length of time to degree. Tuition information is clear. Web site also includes specific information about tuition: http://www.usa.edu/content.aspx?sec=38&id=4e2c998f---a984---4cbe---b8f4---f7253105cbd3	
Careers and employment	Does the institution provide accurate information about the kinds of jobs for which its graduates are qualified, as applicable?	Yes
	Does the institution provide accurate information about the employment of its graduates, as applicable?	Yes
	Comments: Students interviewed had realistic expectations about their employment opportunities.	

*Section 487 (a)(20) of the Higher Education Act (HEA) prohibits Title IV eligible institutions from providing incentive compensation to employees or third party entities for their success in securing student enrollments. Incentive compensation includes commissions, bonus payments, merit salary adjustments, and promotion decisions based solely on success in enrolling students. These regulations do not apply to the recruitment of international students residing in foreign countries who are not eligible to receive Federal financial.